



ALTERNATE ENTRY APPLICANT QUESTIONNAIRE ADVANCED CERTIFICATE IN SUSTAINABLE BUSINESS

Admissions

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

Instructions: 1) Save this PDF to your desktop, 2) Open with Adobe Reader or Adobe Acrobat, 3) Complete all required fields, 4) Save, 5) Close PDF then re-open to ensure the content you filled in has saved, 6) Submit to BCIT.

Your BCIT ID Number A0	Legal First Name (given name)	Legal Last Name (family name)
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- This form is a program entrance requirement for Alternate Entry. Submission with your application is mandatory for Alternate Entry.
- You must save this form to your computer and upload the completed and signed (see below) version to your online application.
- The program area will evaluate your answers; please write in complete sentences (rather than point form).

EDUCATION OBJECTIVES

What are your objectives for pursuing this program?

WORK AND VOLUNTEER EXPERIENCE

Please describe you experience below:

POSITION 1 Type of Position (choose one)	Start Date	End Date
	Position Title	Company Name
	City	Province

Main responsibilities of this position

- 1.
- 2.
- 3.

Main skills and abilities required in this position

- 1.
- 2.
- 3.

How is this experience relevant to this program of study?

POSITION 2

Type of Position
(choose one)

Start Date

End Date

Position Title

Company Name

City

Province

Main responsibilities of this position

- 1.
- 2.
- 3.

Main skills and abilities required in this position

- 1.
- 2.
- 3.

How is this experience relevant to this program of study?

POSITION 3

Type of Position
(choose one)

Start Date

End Date

Position Title

Company Name

City

Province

Main responsibilities of this position

- 1.
- 2.
- 3.

Main skills and abilities required in this position

- 1.
- 2.
- 3.

How is this experience relevant to this program of study?

POST-SECONDARY EDUCATION

Have you completed any post-secondary education or training? Yes No

If yes, briefly describe:

RELEVANT WORKPLACE TRAINING

Have you done any workplace training relevant to this program? Yes No

If yes, briefly describe:

PERSONAL INTERESTS / EXTRA-CURRICULAR ACTIVITIES

Do you participate in any extra-curricular activities (now or in the past)? (e.g. volunteering, clubs, community involvement)

As a participant Yes No

If yes, briefly describe:

As a leader Yes No

If yes, briefly describe:

SPECIAL AWARDS AND CITATIONS

Have you received any special awards or recognition for your accomplishments? Yes No

If yes, list here:

ADDITIONAL INFORMATION

Briefly discuss any additional information you feel is important for the Admissions Committee to know in considering your application.

TO BE COMPLETED BY PROGRAM HEAD/ASSOCIATE DEAN

I approve this application <input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Signature
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